

SUPPLIER CODE		TERMS		F.O.B.		INVOICE DATE	
057015273		2nd day 2nd month		ROCHESTER, MI		09/30/05	
SHIP DATE	SHIPPER NO.	SHIPPED VIA		GROSS		TARE	NET
09/30/05	064609	CHIEFTON CONTRACT		209		21	188
P.O. NUMBER	CUSTOMER PART NUMBER DESCRIPTION			QUANTITY SHIPPED	UOM	UNIT PRICE	AMOUNT
SAG90I0236	26038964 SWITCH MOUNTING BRACKET INTERNAL #: 8964			750	EA	.994	\$745.50
							\$0.00
						Subtotal	\$745.50
						Sales Tax	\$0.00
						Freight Charges	\$0.00
						Invoice Total	\$745.50
						Disc Available	\$0.00
						Funds: USD	

1671 East Hamlin Road
Rochester, Michigan 48307
Phone: 248-651-6302
Fax: 248-651-0703
DUNS #057015273

S O L D T O
GMAAG-DELPHI SAGINAW
1200
NAO DISBURSEMENTS
INVOICELESS SUPERVISOR
P.O. BOX 436040
PONTIAC, MI 483436040

005356878
GM SAGINAW DIVISION
3900 HOLLAND RD
PLANT 06
SAGINAW, MI 48601

SI - 2 HO

SUPPLIER NO.
057015273

EDVIA CHIEFTON CONTRACT SVCS.

TERMS

2000

OUR NO.	PURCHASE ORDER NO. ACCUM. SHIPPED	NO. OF PKGS. GROSS WGT.	PART NUMBER DESCRIPTION	QUANTITY SHIPPED	UNIT PRICE	AMOUNT
3964	SAG9010236 129125	6 206	26038964 SWITCH MOUNTING BRACKET LOT 23405 750 PCS BOX# PRICE VALID 1/1/05-12/31/05 DAILY MILK RUN 1:00 PM	750		
<p>We hereby certify that these goods were produced in compliance with all applicable requirements of Section 6, 7, and 12 of the Fair Labor Standards Act, as amended, and of the regulations and orders of the United States Department of Labor issued under Section 14 thereof.</p>						
6-SC		206				
TOTAL NO. OF PACKAGES		TOTAL WEIGHT				

NUMERICAL FILE COPY

HFO-22 / REV. LVL: A 1/23/96

We hereby certify that these goods were produced in compliance with all applicable requirements of Section 6, 7, and 12 of the Fair Labor Standards Act, as amended, and of the regulations and orders of the United States Department of Labor issued under Section 14 thereof.

HFO-22 REV. LVL: A 1/23/96

NUMERICAL FILE COPY

CARRIER: CHIEFTON CONTRACT SVCS CFCN CARRIER'S NO.: SHIPPER'S NO.:

From HAMLIN TOOL AND MACHINE COMPANY, INC.
At ROCHESTER, MICHIGAN 48307 D-U-N-S #057015273

the property described below in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment. Shipper hereby certifies that he is familiar with all the terms and conditions of said bill of lading including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to GM SAGINAW DIVISION (Mail or street address of consignee — For purposes of notification only)
3900 HOLLAND RD
PLANT 06
SAGINAW, MI 48601

NO. PACKAGES	DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS	* WEIGHT (SUBJECT TO CORRECTION)	CLASS RATE OR	CHECK COL
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Supplier# 057015273 SID #

6 PCS71 CARTON 64609 188 NET WT.
18 TARE WT.
206 GROSS WT.

GM SAGINAW DIVISION

===== T O T A L S =====
188 TOT NET 18 TOT TAR 206 TOT GRS

PCS71-6
CLASS RATE: 50 AUTOMOTIVE METAL PARTS
3RD PARTY COLLECT
BILL: DELPHI S, 44025 SAGINAW MI c/o
DATA 2 LOGISTICS P/O BOX 9115 NORWOOD, MA 02362

Trailer#: 584907
ShipTime: 1245
136637

<small>Subject to Section 7 of conditions of applicable bill of lading. If this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</small>	If charges are to be prepaid, write or stamp here, "To be Prepaid".	Received \$ _____ to apply in prepayment of the charges on the property described hereon.	Received \$ _____ to apply in prepayment of the charges on the property described hereon.	Charges advanced: \$ _____	C.O.D. SHIPMENT C.O.D. AMT _____ Collection Fee _____ Total Charges _____
		Agent or Cashier _____ Per _____ (The signature here acknowledges only the amount prepaid.)	Agent or Cashier _____ Per _____ (The signature here acknowledges only the amounts prepaid.)		
THIS SHIPMENT IS CORRECTLY DESCRIBED					CORRECT WEIGHT IS _____ LBS.
<small>† This is to certify that the above articles are properly described by name and are packed and marked and are in proper condition for transportation according to regulations of the Interstate Commerce Commission. * If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is carrier's or shipper's weight. † Shipper's imprints in lieu of stamp, not a part of Bill of Lading approved by the Interstate Commerce Commission. NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding _____ per _____.</small>					
<small>† The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Consolidated Freight Classification.</small>					

HAMLIN
TOOL AND MACHINE COMPANY, INC.
1671 EAST HAMLIN ROAD
ROCHESTER, MICHIGAN 48307
Shipper, Per _____ Agent, Per *[Signature]*

Permanent post office address of shipper

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